

**IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI
SOUTHERN DIVISION**

GERALD B. HEBERT, #K4559

PLAINTIFF

V.

CIVIL ACTION NO. 1:06cv46LG-JMR

**GEORGE PAYNE, MAJOR RILEY,
RICK GASTON, PHIL TAYLOR, SGT.
ELLSBERRY, OFFICERS GREGORY,
BILLINGSLY AND ADOFT, ALL IN
THEIR INDIVIDUAL AND OFFICIAL
CAPACITIES**

DEFENDANTS

**FIRST SET OF INTERROGATORIES PROPOUNDED TO PLAINTIFF,
GERALD B. HEBERT, BY DEFENDANT, GEORGE PAYNE, JR., IN HIS OFFICIAL
AND INDIVIDUAL CAPACITIES AS SHERIFF OF HARRISON COUNTY**

COMES NOW, Defendant, George Payne, Jr., in his Official and Individual Capacities as Sheriff of Harrison County, by and through his attorneys, Dukes, Dukes, Keating and Faneca, P.A., and by way of Interrogatories in accordance with the Federal Rules of Civil Procedure, does hereby propound the following discovery unto the Plaintiff, Gerald B. Hebert.

This discovery is continuing in nature and requires you to file supplemental answers in accordance with the Federal Rules of Civil Procedure if you obtain further or different information after submission of your initial answers before trial, including in each supplemental answer the date and manner in which further or different information came to your attention.

The Interrogatories are propounded as follows, to-wit:

INTERROGATORY NO. 1: Have you ever been involved as a Plaintiff or Defendant in any other lawsuits or any other claims for money damages? If your answer is in the affirmative, please furnish specifics concerning the allegations of any such lawsuits or claims,

including the names of all parties thereto, the court, the state, the county, and case number under which the lawsuit was filed and the disposition of same.

INTERROGATORY NO. 2: Are you now or have you ever been married? If your answer is in the affirmative, please list the maiden and married name of your past or present spouse or spouses; last known address(es), telephone number(s), and place(s) of marriage(s) and reason(s) for termination of the marriage(s). Please provide the same information for any children you have, whether you had them with one of your spouses or not.

INTERROGATORY NO. 3: State in specific detail the facts which you allege support your claims against Defendants, and state in what manner you contend each Defendant named in this lawsuit allegedly violated your rights, constitutional or otherwise, giving rise to your claims against them, and please state each and every act or omission committed by each Defendant which you claim make them liable to Plaintiff.

INTERROGATORY NO. 4: Please list and describe every specific incident(s), including the date and time of each incident(s), and the names and addresses any and all witnesses to the incident(s), whereby you claim that your constitutional rights were allegedly violated by Defendants, and please state how each Defendant allegedly violated yours rights.

INTERROGATORY NO. 5: Please identify by name, address, and telephone number any and all witnesses whom you will or may call at the trial of this cause.

INTERROGATORY NO. 6: Please list by name, address, and telephone number all persons who may have knowledge of the events complained of in your Complaint and other pleadings.

INTERROGATORY NO. 7: Please identify each individual whom you propose to call as an expert witness at the trial of this cause, stating the subject matter on which the expert is

expected to testify, the substance of the facts and opinions to which the expert is expected to testify, and a summary of the grounds for each such opinion. Please also furnish as a part of your answer to this Interrogatory, a resume or curriculum vitae of each proposed expert witness.

INTERROGATORY NO. 8: Please state whether you ever reported any of these alleged violations of your constitutional rights to anyone at the Harrison County Jail. If so, please provide the date and time when you reported the incident and state what information you included in your report. Please identify who you reported the incident to, including name and badge number. In addition, if you did report the incident, please state whether to your knowledge, any action was taken, and if so please describe that action.

INTERROGATORY NO. 9: List the names and addresses of all physicians and other health care or mental health care providers who examined or treated you for any injuries claimed by you as a result of the incidents described in your Complaint, or other pleadings stating the dates of treatment, reasons for each visit, and any diagnoses rendered.

INTERROGATORY NO. 10: Please identify each and every hospital, clinic, medical facility, or mental health facility at which you have been examined, confined, or treated for any injury or condition claimed by you to be the result of the incidents alleged in your Complaint or other pleadings, and please list as to each such facility its complete name, address, and dates of treatment.

INTERROGATORY NO. 11: Please describe in detail any and all injuries you allege to have suffered as a result of this incident. Include in your description any and all medical, physiological, psychological, mental health, or other treatment you have received or continue to receive as a result of this incident, including the names and addresses of any and all physicians, hospitals, physiologists, counselors, or other health care providers rendering treatment.

INTERROGATORY NO. 12: Please provide an itemized and detailed list of all damages which you claim to have suffered as a result of the incidents alleged in your Complaint or other pleadings, and please identify in this list each and every piece of evidence which you believe will support your claims.

INTERROGATORY NO. 13 : Please identify by name, address, and telephone number each and every individual with whom you have discussed your allegations made in the Complaint or other pleadings, and please provide a brief description of the discussions you have had with each individual regarding this incident.

INTERROGATORY NO. 14: Have you obtained any statements, whether written, recorded, oral, or otherwise, from any of Defendants or any of their agents, employees, or representatives? If so, please identify the name of each individual from whom you obtained such statement, the date such statement was taken and who has custody of said statement. Please also provide a brief description of the substance of said statement.

INTERROGATORY NO. 15: Please list each and every criminal offense for which you were incarcerated at the Harrison County Adult Detention Center at the time of the events alleged in the Complaint, and for each such charge, please state whether those charges are presently pending, or whether the charges against Plaintiff have been resolved. If they have been resolved, please state the manner in which they have been resolved, i.e, whether by acquittal, dismissal, conviction, or otherwise. If convicted, please state any sentence imposed. If any such charges remain pending, please state the date on which they are scheduled for trial.

INTERROGATORY NO. 16 : Are you alleging that each of these Defendants personally caused or participated in any of the alleged violations of your constitutional rights contained in the Complaint, or are your claims against any of them based strictly on their positions as Supervisors?

INTERROGATORY NO. 17: Please state whether Sheriff George Payne was ever present or to your knowledge whether he actively participated in any events contained in your Complaint. If Sheriff George Payne was not personally present during any of these incidents, are you claiming that he is liable to you only because of his role as a supervisor for the Harrison County Sheriff's Office?

INTERROGATORY NO. 18: Please state whether Dianne Gatson-Riley was ever present or to your knowledge whether she actively participated in any of the events contained in your Complaint. If Dianne Riley was not personally present during any of these incidents, are you claiming that she is liable to you only because of her role as a supervisor for the Harrison County Sheriff's Office?

INTERROGATORY NO. 19: Please state whether Phil Taylor was ever present or to your knowledge whether he actively participated in any of the events contained in your Complaint. If Phil Taylor was not personally present during any of these incidents, are you claiming that he is liable to you only because of his role as a supervisor for the Harrison County Sheriff's Office?

INTERROGATORY NO. 20: Please state whether Rick Gaston was ever present or to your knowledge whether he actively participated in any of the events contained in your Complaint. If Rick Gaston was not personally present during any of these incidents, are you claiming that he is liable to you only because of his role as a supervisor and implementor of policies for the Harrison County Sheriff's Office?

INTERROGATORY NO. 21: Are you alleging that these Defendants were responsible for establishing rules, regulations, and procedures which led to the alleged violation of your rights? Please list each and every rule, regulation, ordinance, policy or other procedure which you allege was violated or negligently drafted or not drafted which you claim contributed to your alleged injuries.

INTERROGATORY NO. 22: Do you contend that there was in existence an official policy, practice or custom which resulted in injury or damage to you? If yes,

- a. Identify and describe the official policy, practice, or custom;
- b. State the date on which the policy, practice or custom commenced;
- c. State all the underlying facts on which you base your answers to "a" and "b" above.

INTERROGATORY NO. 23: Please identify, list, and describe all documents which you plan to introduce at a trial of this cause.

INTERROGATORY NO. 24: Is someone assisting you with the prosecution of this case, including but not limited to, the drafting of your correspondence, pleadings, discovery requests, and legal research? If so, please provide the name, social security number, address, and phone number of all persons who are assisting you.

RESPECTFULLY SUBMITTED, this the 6th day of June, 2006.

**GEORGE PAYNE, JR., IN HIS OFFICIAL
AND INDIVIDUAL CAPACITIES AS
SHERIFF OF HARRISON COUNTY,
Defendant**

BY: DUKES, DUKES, KEATING & FANCA, P.A.

BY: s/Cy Faneca
CY FANCA, MSB #5128
HALEY N. BROOM, MSB #101838

Cy Faneca, MSB #5128
Sul Ozerden, MSB #99220
Haley N. Broom, MSB #101838
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2909 - 13th Street, Sixth Floor
Post Office Drawer W
Gulfport, Mississippi 39502
Telephone: (228) 868-1111
Facsimile: 228) 863-2886

CERTIFICATE OF SERVICE

I, CY FANCA, do hereby certify that I have this day delivered, via United States Mail, postage fully pre-paid, a true and correct copy of the above and foregoing pleading to the following:

Gerald B. Hebert #K4559
WCCF U/T-106
Post Office Box 1079
2999 Hwy 61 North
Woodville, MS 39669

This, the 6th day of June, 2006.

s/Cy Fanca
CY FANCA